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DIVISION OF CONFORMION
TALLATIA SSET, FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 5hell Flooring Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Paul Shell Name of Person
Firm/Company
2259 Stonewood lane \$ Pris &
Tallahassee #L 32305 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Paul Shell at (850) 567-0577 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ 155.00 Filing Fee \$\ \text{Certified Copy}\$\$ (additional copy is enclosed) \$\ \text{Certified Copy}\$\$ (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	s:
Shell Flooring (Must end with the words "Limited Liab	L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the particle.	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
2259 Stonewood lane Tall, +6 32305	SAME
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the Paul Shell Name 2259 Stonewood to Florida street address (P.C. Tallahussele City, State,	registered agent are: Physical Registered agent
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	Paul Shell 2259 Stonewood lane Tall, the 32305
(Use attachment if necessary)	
ARTICLE V: Effective date, if other the	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE: Signature of a	member or an authorized representative of a member.
of this docume that the facts s	with section 608.408(3), Florida Statutes, the execution ent constitutes an affirmation under the penalties of perfury tated herein are true.) Typed or printed name of signee
Filing Fees:	

rung rees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)